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SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
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Sm
** CONTINUING DATA *****

THIS APPLICATION IS A CIP OF 09/852,911 05/09/2001
AND A CIP OF 09/780,669 02/09/2001
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AND A CIP OF 09/709,729 11/09/2000 ABN
AND A CIP OF 09/685,166 10/10/2000
AND A CIP OF 09/679,426 10/02/2000
AND A CIP OF 09/657,279 09/06/2000
AND A CIP OF 09/651,236 08/29/2000
AND A CIP OF 09/636,215 08/09/2000 *
AND A CIP OF 09/605,783 06/27/2000
AND A CIP OF 09/593,793 06/13/2000
AND A CIP OF 09/570,737 05/12/2000
AND A CIP OF 09/568,100 05/09/2000
AND A CIP OF 09/536,857 03/27/2000
AND A CIP OF 09/483,672 01/14/2000
AND A CIP OF 09/443,686 11/18/1999 ABN
AND A CIP OF 09/439,313 11/12/1999 PAT 6,329,505
AND A CIP OF 09/352,616 07/13/1999
AND A CIP OF 09/288,946 04/09/1999
AND A CIP OF 09/232,149 01/15/1999
AND A CIP OF 09/159,812 09/23/1998

AND A CIP OF 09/115,453 07/14/1998
 AND A CIP OF 09/030,607 02/25/1998 PAT 6,262,245
 AND A CIP OF 09/020,956 02/09/1998 PAT 6,261,562
 AND A CIP OF 08/904,804 08/01/1997 ABN
 AND A CIP OF 08/806,099 02/25/1997 ABN
 (*) Data inconsistent with PTO records.

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/30/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 10	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Signature <i>Gu</i> Initials <i>2/11/05</i>				

ADDRESS

00500

TITLE

Compositions and methods for the therapy and diagnosis of prostate cancer

FILING FEE RECEIVED 870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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		<input type="checkbox"/> 1.18 Fees (Issue)
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